

Application of Decree Number
09/1742/061

CLAIMS AS FILED - PART I

FOR	NUMBER FRED	NUMBER EXTRA
BASIC FEE (3) CFR 1.10(e))		
TOTAL CLAIMS (3) CFR 1.10(c))	mtive 20 +	
INDEPENDENT CLAIMS (3) CFR 1.10(u))	mtive 3 +	
MULTIPLE INDEPENDENT CLAIM PRESENT		(3) CFR 1.10(d))

* If the difference in column 1 is less than zero, enter '0' in column 2.

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	FEES		RATE	FEES
R 1.....*	1.....	OR	R 1.....*	1.....
R 1.....*	1.....	OR	R 1.....*	1.....
R 1.....*	1.....	OR	R 1.....*	1.....
TOTAL	1.....	OR	TOTAL	1.....

CLAIMS AS AMENDED - PART II

119106

(Column 1)

(Col.

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total (37 CFR 1.16(l))		" 20	
Independent	(37 CFR 1.16(l))	1	Minus	... 15	—

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (11 CFR 1.16(b))

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<u>X \$ 25</u>		OR	<u>X \$ 50</u>	
<u>X \$ 100</u>		OR	<u>X \$ 200</u>	
<u>+ 1</u>		OR	<u>4 \$</u>	
TOTAL AD'L FEE		OR	TOTAL AD'L FEE	

		(Column 1)	(Column 2)		(Column 3)
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (2) CFR 1 (601)	*	Minus	**	*
	Independent (2) CFR 1 (601)	*	Minus	***	:

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (22 C.F. 1.1610)

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$ ____ =		OR	X \$ ____ =
X \$ ____ =		OR	X \$ ____ =
4 \$ ____ =		OR	4 \$ ____ =
TOTAL ADD'L FEE		TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER ADJUSTMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
1. Total Independent Dependents	Plus	**	+
Independent (3) (c) (4) (6) (6)	Minus	***	+

FIRST PRESENTATION OF MULTIPLE DEPENDENCIES © 2011, 10/25/11, 11

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
1.5 %		1.5 %	
2.5 %		2.5 %	
4.5 %		4.5 %	
TOTAL 100% FEE		TOTAL 100% FEE	

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.
** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'.
** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3'.
The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.
Comment or information is requested in 37 CFR 1.16. The information is required to obtain or retain a benefit by the person which is in the (and in the 10) process) an application. Confidentiality is guaranteed by 35 U.S.C. 127 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, due to gathering, reviewing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Committee for Petitions, P.O. Box 1450, Alexandria, VA 22313-1450.

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